

<b>CLAIMS ONLY</b>						SERIAL NO.	FILING DATE	
						APPLICANT(S)		
<b>CLAIMS</b>								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1								
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TOTAL IND.	4		↓		↓		↓	
TOTAL DEP.	15		←		←		←	
TOTAL CLAIMS	19	██████	██████	██████	██████	██████	██████	██████

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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